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TO: Commissioner of Patents
FAX NO.: (703) 872-9318
FROM: Keith P. Taboada, Esq.
DATE: September 26, 2003
MATTER: Serial No. 09/997,937 Filed: 12/3/01
DOCKET NO.: 821001 (AZMT/001)
APPLICANT: Lee et al.

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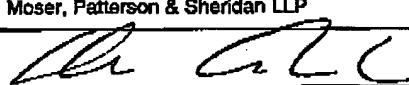
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/997,937
	Filing Date	12/3/01
	First Named Inventor	Lee
	Group Art Unit	2812
	Examiner Name	Roman, Angel
Total Number of Pages in This Submission	Attorney Docket Number	821001 (AZMT/001)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Supplemental Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission
Remarks It is believed that no fee of any kind is required for filing the enclosed Supplemental Amendment. If I am mistaken, please charge the fees, as appropriate, to Deposit Account No. 20-0782. To facilitate a charge, a duplicate copy of this letter is enclosed.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Keith P. Taboada, Esq. - Reg. No. 45,150 Moser, Patterson & Sheridan LLP
Signature	
Date	September 26, 2003

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Atty. Dkt. AZMT/001
Serial No. 09/997,937
Supplemental Amendment

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

David Lee

Serial No.: 09/997,937

Filed: December 3, 2001

Confirmation No.: 5738

For: **METHOD AND
APPARATUS FOR AN
AIR-CAVITY PACKAGE**

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Group Art Unit: 2812

Examiner: Roman, Angel

Commissioner for Patents
P.O. Box 1450
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37 CFR 1.8

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9/26/03 Karen W. Zeman
Date Signature

Dear Sir:

SUPPLEMENTAL AMENDMENT

**This is a supplemental amendment to the Official Action mailed April 1, 2003.
Please amend the above-identified application as follows:**